TAA and DW Co-Enrollment Fact Sheet #2:

Perceived Barriers of Differing Eligibility & Benefit/Service Provision

Data shows that co-enrollment between TAA and the WIOA Title I Dislocated Worker (DW) program results in better performance outcomes that are significant and consistent over time. This is based on data reported for both programs.¹ However, only 50.3 percent of current TAA participants are co-enrolled with the DW² program.

In order to encourage evidenced-based strategies for improved outcomes, this FAQ addresses the perceived barriers to co-enrollment of differences in eligibility and benefit and service provision. (TAA and DW Co-Enrollment Fact Sheet #1 addresses the perceived barriers to co-enrollment of cost and performance.)

Eligibility Requirement	DW	TAA	Comment
for Program/Service	Program	Program	
TAA Certified Worker		✓	Only those workers who are covered by a certified
Group			petition are eligible.
Selective Service	✓		TAA does not have this requirement, but non-
			compliance with Selective Service is extremely rare.
			Individuals can register with the Selective Service
			and be eligible to enroll in the WIOA DW program.
Requires Birth			Neither program requires individuals to present their
Certificate			birth certificates to be eligible to receive services.
			However, for the TAA program, documentation is
			needed to prove the individual's age and eligibility to
			work in the United States.
Assessment	✓	✓	Both programs require an assessment to provide
			services. Furthermore, the assessments are not
			duplicative and the TAA assessment can build off of
			the DW assessment.
Training – 6 Criteria for		✓	These criteria for approving training are required for
TAA Training Eligibility			TAA, but also represent a best practice approach in
			determining appropriate training for an individual.
Training – Requires Use	✓		TAA must allow training through non-ETPL training
of WIOA Eligible			vendors. However, many training vendors are
Training Provider List			already on the ETPL, so many TAA participants
(ETPL)			receive training from ETPL vendors. In addition, DW
			is not required to pay for any part of training for
			participants who are co-enrolled with TAA.

¹ For more details on performance outcomes for co-enrolled participants, see TAA and DW Co-Enrollment Fact Sheet #1.

² Based on PIRL data, 1/1/18-3/31/18

Scenarios

Perceived Barrier #1: Differing Eligibility and Regulatory Requirements

Discussion: There are numerous differences between WIOA and TAA program requirements for qualifying for various types of reemployment assistance. For example, there are differences in training approval criteria, availability and amounts of job search allowances, availability and amounts of relocation allowances, income support eligibility criteria, and different supportive services. Other differences between the TAA Program and WIOA include the availability and amounts of training funds and rules for reimbursing travel expenses.

Solution(s): States should ensure that local workforce staff possess a basic understanding of the TAA program, including similarities and differences with WIOA and other partner programs. States are encouraged to establish policies that support the needs of all dislocated workers, including those impacted by trade, and to promote goals for seamless service delivery.

Coordination between partner programs to develop a common framework or tools for customers may have a positive impact. Products or tools may be developed using TAA case management and employment funds. States should also consult with their Regional Office for guidance on additional allowable activities that can be supported with TAA funding.

Perceived Barrier #2: Different Case Management and Financial Management Information Systems (MIS) Across Programs

Discussion: State agencies and local areas often have a separate MIS for the TAA Program and for other comparable programs such as WIOA, and sometimes even between various program benefit components within these programs. This can make it difficult for staff from different programs to effectively coordinate case management efforts and expenditures. Separate MIS sends a message that the TAA and WIOA programs are distinct, segregated, and that true seamless integration is not a priority.

Solution(s): A common MIS promotes the one system concept in a very tangible way. Further, it may be the most effective means of promoting and supporting the seamless integration of services and co-enrollment. The PIRL reporting system was designed to allow participant information to be kept on one system. Where state policy does not allow for this, program staff may coordinate through other means.

Aside from integrating reporting systems, ensuring frequent communication between program staff occurs on the co-enrolled participants (such as weekly huddles) can help ensure participant success.

Perceived Barrier #3: Multiple Eligibility Documents and Paperwork

Discussion: Separate eligibility documents are burdensome to customers and staff, and reinforce the notion of separate delivery systems.

Solution(s): A combined applicant/participant and financial management system is the ideal solution. An alternative would be to have a common application with common data elements that meet the reporting needs of all required partners.

Perceived Barrier #4: Different Assessment Systems and Individual Employment Plans

Discussion: Partner programs within the One-Stop system may have different types of assessment instruments that can result in participants undergoing multiple rounds of assessment. Additionally, partners do not always share the same definition of assessment. For some it is a very specific *instrument*, which has to be administered and scored, while for others it is more of a *process* of goals, needs, and/or skills identification. Even when there may be general agreement on the definition and purposes of assessment, there may be substantial differences of opinion regarding the results of the assessment. In addition, programs may have a specific or required format for an Individual Employment Plan (IEP) or Reemployment Plan.

Solution(s): It is critical that the partners work together to develop a common understanding of what the assessment should *achieve*, and the appropriate mechanisms for obtaining that information. A next step toward integration could be the acceptance of partners' assessments or IEPs, and the elimination of redundant assessment or IEP steps. Additionally, assessment and IEP processes for co-enrollments should be addressed in appropriate State and local memoranda of understanding. Finally, the ideal solution would be the adoption of common assessment and IEP instruments that fulfill the requirements, needs and objectives of all partners.

Perceived Barrier #5: Co-Enrolling TAA Participants Reduces Resources for Other Dislocated Workers

Discussion: Some believe that the best way to serve dislocated workers as a whole is to refrain from practices such as co-enrollment. For example, even though TAA Program participants come with access to training funds and income support, from the perspective of some, providing services at the WIOA Title I level to co-enrolled TAA participants is a drain on available staff resources.

In the past, case management was considered an administrative expense for TAA Program participants. As a result, TAA Program funds could not be used to fund these services. However, since the 2009 amendments, costs for case management can be charged to TAA Program funds, but many states have failed to adjust their service models to take advantage of these funds.

Solution(s): Early intervention is critical to effectively serve dislocated workers, including those who are eligible for TAA. Given the delay caused by the TAA group eligibility process, co-enrolling TAA eligible workers in the DW program helps ensure expedited employment services, including training assessments. Case management and early intervention services increase customer service and lead to more positive outcomes. In addition, the current TAA Program requires that states spend at least five percent of their TAA Program funds for employment and case management activities. There is no maximum percent that can be expended on these activities.

Perceived Barrier #6: Lack of Sufficient TAA Program Funding to Provide Necessary Staff at the Local and State Levels

Discussion: Trade-affected workers may require more staff intensive services, e.g., job search assistance, relocation assistance, training, and follow-up. Service levels vary widely depending upon the available staff to provide these services to trade-affected workers.

Solution(s): TAA provides funding for employment and case management services. TAA funds are also used to support infrastructure and One-Stop operating costs. Local agreements should be established among the One-Stop partners that increase communication and include arrangements for cost pooling to enable utilization of other funding sources. The funding matrix available in the attachment to TEGL No. 15-12 provides some explanation of what benefits and services each funding stream may be used to provide. States should also consult with their Regional Office for guidance on additional allowable activities that can be supported with TAA funding.

A minimum of five (5) percent of TAA Program funds must be used for case management and employment services, but no maximum exists. This flexibility allows states to leverage program funds in a manner that may be customized for a variety of program needs.

Perceived Barrier #7: Lack of TAA Program Knowledge at Comprehensive One-Stop Centers or Affiliate One-Stop Centers

Discussion: The requirements of a comprehensive One-Stop center include making TAA services accessible to customers. A lack of adequate staff training and information may result in insufficient information being provided to trade-impacted workers and incorrect eligibility determinations being made.

Solution(s): According to TEGL 18-17, Attachment 3, Part B:

The TAA Program is a required One-Stop partner under the WIOA statute and regulations. As a WIOA required partner, the TAA Program is responsible for providing access to TAA benefits and services to adversely affected workers through the AJC network. Under WIOA and the Trade Act, states must integrate TAA services into their one-stop delivery system; provide rapid response and appropriate career services to worker groups on whose behalf a petition has been filed; and disseminate benefit information that provides workers an accurate understanding of the TAA Program's benefits and services in such a way that it is transparent to the worker applying for them. CSAs must also use their state's AJCs as the main point of contact for participant intake and delivery of TAA benefits and services.

Staff at comprehensive One-Stop and affiliate sites should have sufficient information and training to recognize potential eligibility for various partner program(s). Several States have developed reference and training materials to assist with co-enrollment. TAA Case Management funds are also available for providing this training to improve case management.

Perceived Barrier #8: Participants Who Only Receive Reemployment Trade Adjustment Assistance (RTAA) Do Not Need the Benefits of Co-Enrollment

Discussion: RTAA is a benefit for workers age 50 or older who do not earn more than \$50,000 annually in new employment. Recipients of RTAA receive a wage supplement when the recipient accepts new employment at a lower wage. Because these participants must be employed, there is a perception that they do not need to receive other services and be co-enrolled.

Solution(s): Individuals who may be eligible for RTAA should also be co-enrolled with the DW program. If they are co-enrolled in the DW program, they can begin receiving employment and case management services while waiting to be determined eligible for the TAA Program. They may also be available to receive supportive services through the DW Program. Additionally, RTAA participants who receive case management services are more likely to retain their employment than those who are eligible but do not receive RTAA.³

Even enrolled in DW, they should still also receive case management services through TAA. Note that RTAA participant should also receive Rapid Response services, as part of a petitioning worker group.

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³ Summit Consulting, 2017